



California Natural Resources Agency

DEPARTMENT OF FISH AND GAME

**MOBILITY IMPAIRED DISABLED PERSONS MOTOR VEHICLE  
HUNTING LICENSE APPLICATION**

SEE INSTRUCTIONS ON REVERSE. TYPE OR PRINT CLEARLY.

**SECTION 1. THIS SECTION MUST BE FILLED OUT BY APPLICANT**

HUNTING LICENSE DOC ID NUMBER D-	DRIVER'S LICENSE OR DMV ID NUMBER	STATE	GO ID NUMBER (FROM ALDS ISSUED LICENSE)
FIRST NAME	M.I.	LAST NAME	DAY TELEPHONE ( )

MAILING ADDRESS

CITY	STATE	ZIP CODE	E-MAIL ADDRESS		
SEX <input type="checkbox"/> MALE <input type="checkbox"/> FEMALE	HAIR COLOR	EYE COLOR	HEIGHT (Ft., In.)	WEIGHT	DATE OF BIRTH

PLEASE INDICATE TYPE OF **PERMANENT** DISABILITY:

- ☐ FULLY CONFINED TO A WHEELCHAIR  
☐ SINGLE OR DOUBLE AMPUTEE ABOVE THE KNEE, OR DOUBLE AMPUTEE BELOW THE KNEE  
☐ MUST DEPEND UPON THE AID OF A WALKER, CRUTCHES, ETC., TO WALK

"No person shall pursue, drive, herd, or take any bird or mammal from any type of motor-driven air or land vehicles, motorboat, airboat, sailboat, or snowmobile, except: (c) Pursuant to a permit from the department issued under such regulations as the commission may prescribe." The Department will consider requests to hunt from a motor vehicle based upon the information on this application form. The applicant, if approved, will be issued a license which will specify the conditions under which the licensee will be allowed to hunt from a vehicle. The licensee will be required to adhere to the following minimum requirements: (1) The licensee shall be accompanied by an ambulatory assistant who shall immediately retrieve, and tag if necessary, all game taken; (2) The assistant shall not possess a weapon unless he/she is a licensed hunter in possession of the appropriate tags for the game being taken; (3) The vehicle must be stopped and the engine must be shut off prior to discharging the weapon; (4) The licensee shall have the license in possession while in the field and present it upon request to any peace officer.

*In the event a license is granted, I hereby agree to abide by all conditions of said license and all laws and regulations of the Fish and Game Code of California, and Title 14, of the California Code of Regulations (CCR). I am eligible for license by type of permanent disability indicated. I am not under revocation or suspension, nor is there a case pending that would restrict me from obtaining a license. I have not made more than one application for a Mobility Impaired Disabled Persons Motor Vehicle Hunting License. My signature below is written consent to use this information for the purpose of verifying disability. I hereby certify that all information contained on this application and/or submitted to meet the requirements for issuance of subject license is correct and true. I understand that, in the event that this information is found to be incorrect or untrue, the license issued will be considered invalid and must be surrendered where purchased and that I will be subject to criminal prosecution. I understand this license may be suspended or revoked by the Fish and Game Commission if I am convicted of, or plead guilty or nolo contendere to, a Fish and Game violation.*

APPLICANT'S SIGNATURE <b>X</b>	DATE
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**SECTION 2. THIS SECTION MUST BE FILLED OUT BY A LICENSED PHYSICIAN**

To qualify for this license, the applicant must be certified by a licensed physician as having a **permanent physical disability** and is **nonambulatory or mobility is substantially impaired**. "Nonambulatory" means permanently, physically reliant on a wheelchair or similar remedial appliance or device for mobility. "Substantially Impaired Mobility" means virtual inability to move on foot due to permanent physical reliance on crutches, canes, prosthetic appliances or similar remedial appliance or device. **THE QUALIFYING DISABILITY MUST BE PERMANENT AND CLEARLY EXPLAINED BY THE PHYSICIAN.**

QUALIFYING PERMANENT PHYSICAL DISABILITY

PHYSICIAN'S FIRST NAME	M.I.	LAST NAME
ADDRESS	DAY TELEPHONE NUMBER ( )	
CITY	STATE	ZIP CODE

*I hereby certify that the information provided above is correct and true and that the above described disability is permanent and fully complies with the above described conditions.*

PHYSICIAN'S SIGNATURE <b>X</b>	DATE	PHYSICIAN'S LICENSE NUMBER
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**FOR DEPARTMENT OF FISH AND GAME USE ONLY**

REVIEWED BY/DATE	PERMIT NO.	TRANSACTION #	KEYED BY/DATE
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**INSTRUCTIONS FOR COMPLETING  
THE MOBILITY IMPAIRED DISABLED PERSONS MOTOR VEHICLE HUNTING LICENSE APPLICATION**

Please allow 15 business days for processing. Incomplete applications will be returned and could delay the issuance of your license. Contact the License and Revenue Branch at (916) 928-5853 or [SPU@dfg.ca.gov](mailto:SPU@dfg.ca.gov) if you need additional information regarding mobility impaired disabled persons motor vehicle hunting license.

**YOU MUST INCLUDE A PHOTOCOPY OF YOUR DRIVER'S LICENSE, DMV IDENTIFICATION OR ALDS ISSUED LICENSE WITH THIS APPLICATION.**

1. It is mandatory to complete all items in Section 1.
2. Sign and date the application.
3. Have a licensed physician complete Section 2, sign, and date the application.
4. **THE LICENSE AND REVENUE BRANCH ONLY ISSUES THIS LICENSE.** Send this application by mail to the Department of Fish and Game, License and Revenue Branch, 1740 N. Market Blvd, Sacramento, CA 95834, by fax to (916) 419-7586, or by e-mail to [spu@dfg.ca.gov](mailto:spu@dfg.ca.gov).

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**INDIVIDUAL IDENTIFICATION REQUIREMENTS**

All individual applicants must provide valid identification to obtain a license, tag, permit, reservation or other entitlement. Acceptable forms of identification include a valid driver's license or identification card issued by the Department of Motor Vehicles or by the entity issuing driver's licenses from the applicant's state of residence; US Birth Certificate; US Certificate or Report of Birth Abroad; Birth Certificate or passport issued from a US Territory; INS American Indian Card; US Passport; US Military Identification Cards (issued to active or reserve duty, dependent, retired member, discharged from service, medical/religious personnel); or Certificate of Naturalization or Citizenship.

Any applicant less than 18 years of age applying for any license, tag, permit, reservation or other entitlement issued via ALDS shall provide valid acceptable forms of identification, which include any form of identification described above or a parent or legal guardian's identification as described above.

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**NOTICE**

**Disclosure Statement** — Under Section 251, Title 14, of the CCR, the Department of Fish and Game is authorized to collect information from applicants to maintain a record of licensure. All information requested on this application is mandatory unless otherwise indicated. An applicant's name and city of residence may be provided to the public if requested. Other personal information submitted on this application may be released for law enforcement purposes, pursuant to court order, or for official natural resources management purposes.

A licensee may obtain a copy of his/her license records maintained by the Department by submitting a written request to the Custodian of Records, Department of Fish and Game, License and Revenue Branch, 1740 N. Market Blvd, Sacramento, CA 95834. All requests must include the requester's name, address, and telephone number.